

## HEALTH CARE PREPAYMENT PLAN APPLICATION

The organization eligible to apply for a Health Care Prepayment Plan Agreement with HCFA is:  
(1) union or employer sponsored, or (2) does not provide for inpatient hospital services.  
Medicare Part A services are not reimbursable to an HCPP.

Please read the introduction to the application for additional information.

### Files for this application:

Files that have an 'xls' suffix are Excel spreadsheets; all others are MSWord or .pdf. The applicant should fill in the application form, which is the entire Narrative Part of the application.

Forms/tables should be placed in the Documents Part, along with other documents supplied by the applicant, i.e., provider contracts. Follow directions in the application format for placement of hard copy. Also, include the filled in tables as separate files on the application diskette that will be submitted to HCFA.

hcppapp.doc hcppapp.pdf	The basic application form, including: Introduction, General Instructions, Technical Instructions, the Narrative Part that includes: Cover Sheet, Table of Contents, and 5 chapters - General Information, Organizational & Contractual, Health Services Delivery, Financial, Marketing
hcppsetu.doc hcppsetu.pdf	Medicare Set-up Forms - banking information, systems
hcpplice.doc hcpplice.pdf	State License Table
hcppprov.doc hcppprov.pdf	Provider Arrangements Table
hcppinsu.doc hcppinsu.pdf	Insurance Table
hcppinso.doc hcppinso.pdf	Uncovered Expenditures Calculation Worksheet
hcppbudg.xls	Cost Budget Format
hcppenro.doc hcppenro.pdf	Medicare Enrollment Projections

